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ABSTRACT

Following a 5-year planning and development cycle, Illinois has completed its first year of full implementation of a statewide, comprehensive, coordinated system of early intervention services for eligible infants and toddlers and their families under provisions of the Individuals with Disabilities Education Act (IDEA). Among accomplishments noted are: adoption of mission and philosophy statements; use of IDEA funds to expand services at 56 sites; implementation of a statewide system of services; development and implementation of a public awareness program; enactment of the Illinois Early Intervention System Act; establishment of 45 local interagency coordinating councils; establishment of Interagency Agreements between the State Board of Education and seven participating agencies; establishment of a statewide network to coordinate diagnostic services; and appointment of an Early Intervention Ombudsman. Illinois activities and progress are reported in relation to the 14 components required by federal IDEA regulations. A description of each of 10 state agencies represented on the Illinois Interagency Council on Early Intervention is also provided. Additional information addresses interagency agreements, interagency coordination, additional early intervention activities, and the Federal fiscal year 92 budget/expenditure report. (DB)

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YEAR 6
ANNUAL REPORT FOR ILLINOIS
OCTOBER 1, 1992 - SEPTEMBER 30, 1993

ILLINOIS INTERAGENCY COUNCIL ON EARLY INTERVENTION

ILLINOIS STATE BOARD OF EDUCATION
LEAD AGENCY

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ILLINOIS INTERAGENCY COUNCIL ON EARLY INTERVENTION

100 North First Street • Springfield, Illinois 62777-0001

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Providers

General Assembly Representative

Personnel Preparation Representative

Department of Alcoholism and Substance Abuse

Department of Children and Family Services

Department of Insurance

Department of Mental Health and Developmental Disabilities

Department of Public Aid

Department of Public Health

Department of Rehabilitation Services

Illinois Planning Council on Developmental Disabilities

University of Illinois–Division of Specialized Care for Children

Illinois State Board of Education
Lead Agency

MEMORANDUM

TO: Interested Citizens
Local Interagency Councils

FROM: Maureen Patrick, Chair Maureen
Illinois Interagency Council on Early Intervention

DATE: March 1, 1994

SUBJECT: Annual Early Intervention Report

The Individuals with Disabilities Education Act (IDEA) requires that an annual report be made to the Governor on the status of early intervention programs operated within the state for eligible children and their families. The report went to Governor Edgar on December 28, 1993. It presents the planning, progress and statewide implementation of early intervention services which benefit infants and toddlers with disabilities and their families.

I take great pride in presenting to you a copy of the annual report. It depicts the work of Illinois from October 1, 1992 to September 30, 1993. Please feel free to use it or reproduce it locally.

3/intcitlr/194

Illinois Interagency Council on Early Intervention

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Provider Representative
El Valor Corporation

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Division of Specialized Care for Children

Cheryl Boswell
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The Honorable Lee Daniels
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Linda Felton
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Gordon Stiefel, Chair
Bylaws

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PART H OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT IN ILLINOIS

ABSTRACT

Illinois has completed its first year of full implementation after a five-year planning and development cycle for the implementation of a statewide, comprehensive, coordinated system of early intervention services for eligible infants and toddlers and their families. This opportunity was provided through the Individuals with Disabilities Education Act (P.L. 102-119), previously known as Part H , P.L. 99-457. On June 8, 1987, Governor Thompson signed Executive Order Number 4-1987 which created the State Interagency Council on Early Education ("Education" was later changed to "Intervention" and "State" was subsequently changed to "Illinois") and designated the Illinois State Board of Education as the lead agency. On September 23, 1991, Governor Jim Edgar signed into law the Early Intervention Services System Act.

Illinois has accomplished the following to date:

- adopted mission and philosophy statements;
- approved state policies for the required fourteen components;
- provided through IDEA Part H funds for expansion of services in 56 sites for eligible infants and toddlers and families;
- approved the development of a statewide system of early intervention services for eligible infants and toddlers and their families based on a five-year phase-in period;
- implemented the model of the statewide system of services;
- developed a public awareness theme and message which continues to be used throughout the state;
- enacted the Illinois Early Intervention Services System Act on September 23, 1991;
- began development of a five-year plan for implementation of the Early Intervention Services System in 1991;

- established 45 local interagency councils to coordinate services, planning at the local level, and provide technical assistance;

- implemented a Parent Mentoring Program to facilitate participation of parents on local councils;

- secured Interagency Agreements between Illinois State Board of Education and seven participating agencies (Departments of Alcoholism and Substance Abuse, Children and Family Services, Mental Health and Developmental Disabilities, Public Aid, Public Health, and Rehabilitation Services and the Illinois Planning Council on Developmental Disabilities; and secured a Memorandum of Understanding with the University of Illinois' Division of Specialized Care for Children and now with the Department of Insurance);

- contracted with outside financial consultant for technical assistance on the establishment of a central billing office;

- established a statewide network to coordinate diagnostic services and link with the local interagency councils;

- initiated approval process of paraprofessional and professional personnel providing early intervention services through the Personnel Development Committee's supported portfolio process;

- funded the first annual statewide Parent Conference - July 10-11, 1993;

- began development of rules and regulations for the Illinois Early Intervention Services System Act;

- Office of the Auditor General conducted a program audit of the early intervention system as required by P.A. 87-680;

- Governor appointed a new chair of the Council;

- Governor appointed Illinois State Board of Education as lead agency, and

- Governor appointed an Early Intervention Ombudsman.

Individual Component Activities and Progress

The Illinois Interagency Council on Early Intervention, hereafter referred to as the Council, has adopted the required fourteen components as of April 1989. Policies are in compliance with the July 30, 1993 federal regulations.

The individual component activities are addressed as follows:

Component #1 - Definition of Eligible Infants and Toddlers

The orginal definition was accepted on August 9, 1990. Revisions were accepted in December 1991 and January 1992.

Component #2 - Timetable for Availability of Services

Illinois has determined that a system of early intervention services with local community support is in place statewide. Screening and assessment, evaluation, Individualized Family Service Plan (IFSP) development and service coordination are provided at no cost to families.

Component #3 - Comprehensive Multidisciplinary Evaluation of Needs of Children and Families

The 56 Early Intervention Programs statewide implement a model in which families are an integral part of the interdisciplinary team with participation in all assessments. Strengths and needs, identified for the infant or toddler and family, reflect direct family input concerning resources and priorities. The interdisciplinary team members composed of representatives of the family, medical/health services, social services and developmental/educational disciplines as determined by referral or screening information are supplemented by additional disciplines as needed to complete the assessment. Parental consent, cultural sensitivity and the natural environment are reflected throughout all the assessment and evaluation processes.

Timelines for evaluation and assessment include a provision that the evaluation and initial assessment of child and family be conducted within 45 days of referral. If exceptional circumstances make it impossible to complete the evaluation and assessment within 45 days, the agency must document the exceptional circumstances and develop and implement an interim IFSP that is consistent with §303.345 (b) (1) & (2).

Component #4 - Individualized Family Service Plan Which Includes Case Management Services

The February 1988 and August 1992 request for proposals from the Illinois State Board of Education required early intervention programs to expand and improve their services to infants and toddlers with disabilities and their families. One component of these requirements was the development of an IFSP. The IFSP was based on an interdisciplinary assessment of the child, and services were provided through an interdisciplinary and interagency approach.

All applicants included a description of the process for the development of the IFSP which indicated the assessment process for the child and the voluntary family assessment, as well as the designation of a service coordinator. Each program developed a format which addressed all parts of the IFSP at a minimum and proceeded to build individual program requirements into a desired product. IFSP recommendations were provided to the Program Standards Committee. The expertise and experience of the service providers plus input from parents formed the basis for these recommendations.

On June 3, 1993, the Illinois Interagency Council on Early Intervention established a standing committee on the IFSP. The committee is charged with establishing a family-centered IFSP process and recommending a format to be used for Council approval by July 1, 1994.

Component #5 - A Comprehensive Child Find and Referral System

The child find system includes policies and procedures that ensure the identification, location, and evaluation of eligible infants and toddlers and a method for determining eligible infants and toddlers who are receiving/not receiving early intervention services. State regulations under Part B delineate responsibilities for the identification, location, and evaluation of children with disabilities from birth through age twenty-one. A procedural document which further clarifies and expands those responsibilities under Part H was issued by the Illinois State Board of Education in August 1990. The document addresses referrals by primary referral sources, referrals within two days after a child is identified, and evaluation and assessment and an IFSP meeting held within 45 days of referral. FACTS (Funding and Child Tracking System) includes a mechanism for reporting eligible infants and toddlers.

The child find system is coordinated with Part B and the Head Start Act. The coordination of all major child find efforts includes steps by the lead agency to ensure that no unnecessary duplication of effort by participating agencies exists and that the state uses all resources available through each public agency. Implementation of the recommended system of services in selected local community areas, including the child find system, is being conducted to determine barriers to service.

Included in the available public screenings are APORS (Illinois Department of Public Health),

Healthy Kids Programs (Illinois Department of Public Aid-Medicaid EPSDT), Well Baby Clinics (Department of Public Health), Children's Clinics (Division of Specialized Care for Children), Lead Screening (Department of Public Health), Community Screening (Department of Mental Health and Developmental Disabilities), and community preschool screenings by local education agencies.

A marketing media campaign *"Child Find: Building Better Tomorrows"* was developed by the Illinois State Board of Education through a grant to the Gallatin-Hardin-Pope-Saline Educational Service Region beginning in 1989. Each year, program materials have been made available to local school districts via their special education cooperatives, community agencies, and local interagency councils (beginning this fiscal year). Over one million products have been disseminated to date.

A toll-free number (1-800-851-6197) is in place to assist parents who do not know who to contact in their local school district. This service is in operation from 8:00 a.m. to 4:00 p.m., Monday through Friday, and arrangements have now been made to accommodate Spanish-speaking callers, as well as to link callers to the central directory information on early intervention services.

Campaign materials have facilitated contacts with primary referral agents in communities, including hospitals, physicians, parents, day-care programs, local education agencies, public health facilities, social service agencies, and health care providers. The campaign has promoted and provided valuable information to parents and other caretakers.

Component #6 - Public Awareness Program to Focus on Early Intervention

The Public Awareness Committee, a standing committee of the Council, continued its efforts in planning, developing and implementing statewide public awareness activities. Building upon the previously developed "Look What I Can Do" campaign of 1991, the committee purchased quantities of Public Awareness materials to share with the local interagency councils which included "Look What I Can Do" buttons in English, bags, pencils, name tags/labels, round stickers and small brochures; translated the small "Look What I Can Do" brochure into Spanish and printed to distribute to the Local Interagency Councils; purchased Child Find videos in broadcast and VCR quality; purchased the Pathways Awareness Foundation videos entitled "Early Infant Assessment" and "Is My Baby O.K."; purchased the Pathways Awareness Foundation brochure entitled "Parents Don't Delay" in English and Spanish; and printed "Look What I Can Do" camera ready logo sheets for Local Interagency Council use.

On September 27, 1993, the Public Awareness Committe held a strategic planning session in order to identify public awareness goals, objectives and strategies for the next fiscal year. The focus of this session was the development of linkages between the State Public Awareness Committee and the Local Interagency Councils.

Component #7 - A Central Directory of Services, Resources, State Experts, Research and Demonstration Projects

An existing computerized information and referral system for three-to twenty-one-year-olds was expanded to include birth to thirty-six months of age information. This existing system, operated by Direction Services of Iilinois, was awarded the Central Directory grant and used the Central Directory Policy Statement parameters to assure fulfillment of the federal requirements including an annual update. This service includes information about public and private early intervention service resources available in the state, research and demonstration projects in the state and professional and other groups which provide assistance to children and their families. Copies of the data base are also available in each geographic region of the state including rural areas and in places and a manner that ensure accessibility by persons who are disabled.

To ensure the general public becomes aware of services, the Central Directory coordinates its marketing efforts with the Child Find and Public Awareness components as well as the Illinois Early Childhood Intervention Clearinghouse and the Illinois Assistive Technology Project. Brochures and bookmarks on the Central Directory are available through more than 100 early intervention programs across the state and at other locations. The Central directory has served as a resource to local interagency councils as they produce local directories appropriate for their local service areas. Information is shared with families via a toll-free voice and TDD phone number, with follow-up correspondence and handouts. The Central Directory provides an 800 number (1-800-634-8540) plus access for Spanish-speaking parents via Fiesta Educativa in Illinois (1-800-532-3393) so specific questions can be answered in Spanish.

Component #8 - A Comprehensive System of Personnel Development

The Council has established a permanent standing committee, the Early Intervention Personnel Development Committee (EIPDC), which addresses the CSPD requirements.

During 1992-1993 the EIPDC met quarterly and has overseen the progress of Components 8 and 13.

A resolution adopted at the April 1, 1993, Council meeting set personnel standards for an experimental five-year period, with data on the supply and demand of personnel to be provided each year. To ensure that these activities are coordinated with the CSPD for Part B, representatives of the EIPCD serve on the CSPD committee.

The EIPDC conducted a Faculty Development Institute which provides a way of supporting faculty from all disciplines who prepare professionals that provide services to infants with special needs and their families.

The purpose of these institutes is to provide faculty in institutions of high education throughout Illinois the opportunity to come together to examine new training issues engendered by this unique population of service recipients. Issues include content and process related to providing training which is family focused and interdisciplinary in its philosophy and practice. The Institute is also used as a planning forum for future activities to address the needs of trainers as they begin to prepare students and practicing personnel for these new roles.

The Illinois Technical Assistance Project (ITAP) provides statewide comprehensive interagency inservice training to personnel serving infants and toddlers with disabilities and their families. The inservice topics include the following:

Infant and Toddler Development

A Family Systems Approach for Individualizing Services

Building Better Teams

Assessment of Infants and Toddlers: Supporting Developmentally and Ecologically Relevant Intervention

Health/Medical Issues of Children Aged Birth through Two and Their Families

Service Coordination and Interagency Coordination

Participants in the ITAP inservices will receive an "official certificate" to indicate completion of training under the ITAP Project for each two-day workshop identified above. Participants in ITAP training consisted of 53 percent early intervention/prevention personnel, 23 percent preschool personnel and 24 percent other.

The Illinois State Board of Education entered into a federally supported partnership project (P*TEIS) with the University of Illinois and the University Affiliated Program. This project is housed at the University of Illinois in Champaign and supports the credentialing system for early intervention personnel.

The P*TEIS grant is to provide training which is geographically and financially available to address the early intervention credentialing needs of current personnel, to carefully evaluate the components of this system with regard to their relative efficiency and effectiveness for meeting future and current personnel needs, and to build networks what will undergird the future comprehensive personnel development system of early intervention.

Meetings were held with ITAP staff to form a partnership in supporting inservice opportunities

funded through Part B. Credits toward credentialing will be provided to personnel participating in ITAP training. Statewide needs assessments guide the development of new inservice offerings. ITAP and P*TEIS are collaboratively providing follow-up to ITAP workshops.

Several meetings are being held to disseminate information concerning the P*TEIS Project. In addition, the Project Director has participated in several state meetings, such as the ITAP and the Regional Technical Assistance Systems (R*TAS), to inform participants about the P*TEIS project. These groups have been instrumental in disseminating grant information to personnel in their regions as well as at training functions. In addition, each R*TAS Coordinator distributed flyers to provide grant information and to promote their support as a partner to this project. Through this partnership effort, the P*TEIS staff have been placed on several mailing lists, allowing project staff to stay up to date on training and personnel issues across the state, as well as organization meeting dates and times. P*TEIS will also assist a subcommittee of the EIPDC in developing a recruitment flyer that can be used by colleges and universities to recruit students into the field of early intervention.

Component #9 - A Single Line of Authority to a Lead Agency

The Illinois State Board of Education, as lead agency, continued to be responsible for the following ongoing activities:

- The general administration, supervision, and monitoring of the programs and activities requiring assistance under Part H of the Education of the Handicapped Act Amendments of 1986, now known as Individuals with Disabilities Education Act (IDEA), P.L. 102-119;

- The identification and coordination of all available resources within the state from federal, state, local and private agency resources;

- The assignment of financial responsibility to appropriate agencies;

- The development of procedures to ensure that services are provided to infants and toddlers with disabilities and their families in a timely manner pending the resolution of any disputes among public agencies or service providers;

- The resolution of intra- and inter-agency disputes; and

- The entry into formal inter-agency agreements that define the financial responsibility of each agency for paying for early intervention services consistent with state law, procedures for resolving disputes, and all additional components necessary to ensure meaningful cooperation and coordination.

Component #10 - A Policy for Contracting or Making Arrangements with Local Service Providers

Illinois has provided Part H services through grants to local early intervention programs since 1988. The RFP process to fund these programs included:

- a summary of the methods to be used to provide required service(s);
- the approximate amount of funds to be used for such service(s); and
- the implementation of program and personnel standards.

Component #11 - A Procedure for Timely Reimbursement of Funds

The Illinois State Board of Education, as lead agency, continues to be responsible for:

- the identification and coordination of all available resources for early intervention services within the state, including those from federal, state, local, and private resources, and
- updating of information on funding resources available for early intervention services as a result of legislative or policy changes.

The Finance Committee is charged with short-term (met) and long-term objectives with regard to the creation of a financing system and securing funding for early intervention programs for eligible children who have a developmental delay, have a condition which has a high probability of resulting in a developmental delay or are at risk of having substantial developmental delay(s) if early intervention services are not provided.

The Finance Committee will determine: (1) how many dollars are presently being spent on services and (2) where the rest of the money will be found to implement fifth-year requirements. The committee is to identify sources of funding for the program, relying on existing state, federal and other third-party payors and identifying the extent to which additional funding and funding sources will be needed.

The lead agency contracted with a financial consultant to provide technical assistance in the establishment of the Central Billing Office (CBO) required by P.A. 87-680.

The Finance Committee of the IICEI has conducted monthly meetings which have resulted in:

- A Values Statement for the CBO

- A DRAFT Implementation Strategy and Timeline for the CBO implementation
- Continuing identification of resources at the local and state level
- DRAFT Policy re: Family Fee Structure and Family Resource Inventory
- Identification of key policy issues related to financing that influence or directly impact upon the CBO and Illinois' Early Intervention financing activities and initiatives.

A **Provider Survey** was sent to all early intervention providers throughout the State in order to gather critical program and service information. Data is being tabulated to provide "portraits" of the 45 Local Service Areas (LSAs). In addition to data, several program and administrative areas have been identified that directly impact financing issues.

Component #12 - Procedural Safeguards

The lead agency in Illinois has adopted procedural safeguards that meet the federal requirements and ensure effective implementation of the safeguards by each public agency involved in the provision of early intervention services.

Component #13 - Policies and Procedures for Personnel Standards

On April 1, 1993, the Council approved the Personnel Guidelines for a 5-year experimental period and data will be reviewed annually by the Council for the early intervention service providers. Technical assistance was provided on specific personnel guidelines e.g. hiring practices, staff development, etc. As of September 16, 1993 the Credentialing Sub-Committee had the following results with the portfolio process: 217 portfolio applications were received; 137 applications were approved; 5 applications require additional points; 72 applications were returned for additional documentation; 1 application was returned for later review; and 2 applications did not meet the approved Personnel Guidelines.

Component #14 - A System for Compiling Data Regarding the Early Intervention Program

The required annual data report of eligible infants and toddlers receiving early intervention services in accord with Part H was submitted to the U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs on February 3, 1993. A total of 1,839 eligible infants and toddlers received early intervention services, and 460 eligible infants and toddlers were identified on a waiting list for one or more early intervention services.

Early Intervention Services for Infants/Toddlers and Their Families

There are currently ten (10) state agencies represented on the Council which directly or indirectly provide or administer early intervention services. A description of agencies' responsibilities follows:

Department of Alcoholism and Substance Abuse (DASA)

DASA coordinates a statewide service network of community-based programs and works with the federal government, state agencies, offices and advisory bodies to respond effectively to the number one health problem facing Illinois citizens. DASA implements programs focusing on substance abuse prevention, treatment, aftercare and research.

Project SAFE (Substance Abuse Free Environment) is a unique multi-level partnership between DASA and the Department of Children and Family Services (DCFS). SAFE provides intensive treatment and parenting education services to a very needy, high-risk population of women who are drug/alcohol involved and who are open cases with DCFS for abuse or neglect.

The Women's Treatment Center is a highly specialized substance abuse treatment program for pregnant and parenting women. The program allows mothers the opportunity to access multiple social services within a single building and allows women to bring their infants and young children with them in the residential and outpatient treatment settings. The program also includes a pre-kindergarten program.

Project Futures, sponsored by DASA, DCFS and the Department of Public Aid (DPA), provides intensive prenatal treatment, parenting and other appropriate services to cocaine-abusing pregnant and post-partum women.

Haymarket/Maryville provides specialized treatment services for post-partum women who have delivered babies who are chemically affected. The program is jointly funded by DASA and DCFS and provides intensive, residential treatment for mothers and their infants with an emphasis on family preservation.

Haymarket is a residential treatment program designed to accept pregnant women at any point in their pregnancy for treatment. After delivery women are referred to the

Haymarket/Maryville program for further services.

The Department provides funding and technical assistance for prevention specialists in the former Drug Free Families With A Future (Infant Mortality Reduction Initiative) areas. These ***Maternal and Child Health*** specialists provide education and training within the local community area in order to reduce the risk of adverse pregnancy outcomes due to substance exposure in utero.

Targeted Maternal and Child Health Program provides early intervention and prevention services to women in seven areas "at highest risk" of infant mortality. Key components include "Integrated Family Intervention Teams (IFIT)" and the Secured Service Matrix. IFIT teams include case managers, outreach and child welfare workers, substance abuse counselors and public aid staff.

Central East Alcoholism and Drug council (CEAD) opened in 1986 as a residential and case management project for women with children under age 12. The program assists women toward a gradual re-entry to community living through case coordination of service linkage throughout the entire continuum of care.

Lake County Health Department - Women's Residential Services provides residential and specialized outpatient services for pregnant and parenting women. Children may stay in residence with their mothers for 3 to 6 months.

Franklin-Williamson Human Services is a halfway house for women serving 12 women at any given time. Four of these beds are reserved for the treatment of pregnant women.

Human Service Center provides intensive outpatient services with outreach and case coordination. This program also has a four bed maternity ward for pregnant addicted women.

Department of Children and Family Services (DCFS)

DCFS provides numerous family preservation services to abused, neglected or dependent children (ages 0-3) and their families when the Department determines it is not necessary to remove the child for protective reasons. Services also include daycare, homemaker, parent training, counseling, and information and referral services.

If the child is placed in substitute care, services are provided to the child(ren), the natural parents, and the substitute caregiver (e.g. foster parents). These services include case management (service coordination), parent training, substitute care placement, and counseling. Additional services which may be provided include child advocacy, day care, homemaker service, family planning, and information and referral.

DCFS strengthened its service planning and delivery for pre-school children who are developmentally disabled or delayed by issuing an Action Transmittal on Pre-School Education Resources for Children. The Action Transmittal provided staff with a complete listing of pre-school programs, including early intervention programs, and reminded staff of the importance of referring children who are developmentally disabled or delayed to such programs.

DCFS also drafted a proposed rule on Educational Services for state wards which includes a section on pre-school education services. This section is geared toward ensuring wards receive pre-school education services where available at nominal or no cost to DCFS.

Through the Child Care Block Grant and Information and Referral System administered by DCFS, collaborative efforts to train child care workers to work with infants and toddlers who are disabled have proven successful.

Department of Insurance

The Department of Insurance regulates insurance companies and producers licensed in Illinois. Its two primary objectives are financial solvency and consumer protection. Other responsibilities include researching insurance law; preparing, overseeing and analyzing new legislation; and conducting hearings on complaints and violations of the Illinois Insurance Code.

Department of Mental Health and Developmental Disabilities (DMH-DD)

DMH-DD provides for the care and treatment of Illinois citizens who have mental illnesses or developmental disabilities. Many of its responsibilities are set out in state law. These may be summarized as providing for the care, treatment, training and development of those citizens. The Department operates 21 residential facilities and funds more than 400 community provider agencies.

Early intervention services may include early identification/screening, assessment, developmental stimulation, case management, parent training, occupational therapy, physical therapy, speech, etc., for children birth through two years old and their families. Services are available to children who have been diagnosed as having a developmental disability or who are at risk for developing a lifelong developmental disability.

Other services are available to families who have a child with a developmental disability.

Diagnosis and Evaluation services determine to what extent an individual has a developmental disability through the evaluation of the present level of developmental disabilities and needs,

impediments, and cause of the disability.

Child and Family Support services include family training, transportation, genetic counseling, life skills training, and social services.

The Family Assistance Program was approved by the Illinois Legislature in 1989 and is mandated by Article IV of P.A. 86-921. This program provides eligible families who have children with severe developmental disabilities or severe emotional disturbances a monthly allowance which may be used to pay for things that will benefit the children and help keep the family together.

Respite service provide a temporary relief to families. This service may be provided in the child's home, in a residential setting or as part of a group day program (after school).

Family Home Maintenance services provide direct staff support to families who care for children with developmental disabilities who are significantly at risk of out-of-home placement. Support services are provided to allow these children to maintain residence at home.

Case Coordination services provide information, referral and coordination of services including assessment of service needs, development of individualized service plans (ISPs), arrangement for service delivery, advocacy and service provider(s) analysis of the service networks, and follow-up for children and adolescents with developmental disabilities.

Illinois Planning Council on Developmental Disabilities (IPCDD)

IPCDD was established in 1974 by federal law. The council is comprised of thirty-eight members appointed by the Governor. Half of the members are individuals with developmental disabilities or relatives of persons with disabilities. The Council advocates and plans for better supports and services to enable people with developmental disabilities to achieve maximum potential through increased independence, productivity and integration into the community.

The Illinois Planning Council on Developmental Disabilities, through its participation on the Illinois Interagency Council on Early Intervention, supports the planning, development and implementation of a statewide early intervention system that is based on family centered, interagency collaboration and inclusion principles. Council staff provides technical assistance and general informational presentations on legislation, inclusion and best practices in early intervention to community agencies and organizations that deliver early childhood services.

The council funded two early intervention projects in FY 93:

Training and Technical Assistance to Local Interagency Councils: This project, funded jointly with the Illinois State Board of Education, provided training and on site technical assistance related to forming and operating local interagency councils in Illinois. Each council was assisted in a systematic planning process designed around the essential components of a comprehensive, coordinated family centered system of services as outlined in legislation, which culminated in the development of local action plans.

Early Intervention Public Awareness Project: This project focused on setting up a mechanism for educating and informing state policy makers and opinion shapers regarding the importance of fully implementing the Illinois Early Intervention Services System Act. The public awareness campaign set up activities and other opportunities for early intervention supporters to educate and inform state policy makers of the need for and the benefits from early intervention in Illinois.

Department of Public Aid (DPA)

DPA assists in the alleviation of poverty and welfare of all the people in Illinois. Programs are designed to sustain and strengthen the family unit and to foster environments in which all people can learn, express themselves and contribute to the community.

Income Assistance Programs

Aid to Families with Dependent Children (AFDC) provides cash grants to low-income families with children deprived of parental support due to death, prolonged absence, unemployment or mental incapacity of one parent. Childless pregnant women may also qualify during the last 4 months of pregnancy if they meet eligibility requirements.

Aid to the Aged, Blind and Disabled (AABD) (SSI State Supplement) -- Persons with low-income who are blind, disabled or aged may receive supplemental state cash assistance payments through this program.

General Assistance has two components: 1) the State Family and Children Assistance Program which follows AFDC policy guidelines, providing cash assistance to families who do not qualify for AFDC and 2) Transitional Assistance Program which is cash assistance program for adults who are considered non-employable.

Refugee Assistance -- Persons granted refugee status by the Federal government are eligible for cash and medical benefits for up to 12 months on arrival in the United States.

Food Stamps -- The Food Stamp program is designed to supplement low-income households and help individuals or families purchase a nutritionally adequate diet. Under income and asset standards set by the U.S. Department of Agriculture, people may receive food stamps even if they do not qualify for other forms of public assistance.

Child Support Enforcement serves AFDC clients and non-AFDC custodial parents who need assistance collecting child support. Provides assistance in establishing paternity, child support obligations and enforcing payment of the obligations. Collects and disburses payments.

Medicaid

Medical Assistance-No Grant (MANG) -- Services under this program include hospital care, long-term care, practitioner services, prescription drugs and other related medical services for eligible families and individuals who are aged, disabled or blind, or have developed mental disabilities or mental illness living in residential facilities. Children who are under 18 lacking parental support are also eligible.

Medical Assistance-No Grant Pregnant Women (MANG-P) provides medical care for pregnant women and children under six years old in families with income up to 133% of the federal poverty level. Also eligible are children ages 6 and 7 in families of income up to 100% of the poverty level.

Healthy Start (Medical Presumptive Eligibility - MPE) provides prenatal care and ambulatory medical services; promotes early and continuous prenatal care which is achieved by allowing providers to initially determine eligibility for Medicaid for pregnant women.

Healthy Kids (EPSDT-Early Periodic Screening, Diagnosis and Treatment) program provides early and periodic screening, diagnosis and treatment for children birth through age 20 who are eligible for Medicaid. Regular dental and vision checkups for children are also provided.

Healthy Moms/Healthy Kids Managed Care Program (HM/HK) provides primary health care for pregnant women and children through age 20, coupled with case management services to pregnant women and young children. Primary Care Providers (PCPs) coordinate health service delivery.

Employment Programs

Project Chance assists AFDC and GA clients who are at risk of long-term welfare dependency. Clients are provided job training, job search and placement and educational services, as well as support services such as day care, transportation and work-related support. JOBS (Job Opportunities and Basic Skills) was included in this program in 1990.

Young Parents Program provides supportive services, home visits, service payments, counseling and information to persons under age 21 receiving public assistance who are pregnant or parenting. This program is available on Chicago's north side. Local office staff help participants attain education and training and develop job readiness.

Project Advance program in selected areas of Cook County provides child care, transportation, parenting instruction, home and family management and an expedited child support enforcement process for teenage mothers receiving public assistance and the fathers of their children.

Child Care Resources and Referral Network (CCRRN) provides access to reliable child care for families eligible for public assistance.

Department of Public Health (DPH)

Illinois' Maternal and Child Health (MCH) program includes a system of preventive and primary care services administered by the Illinois Department of Public Health. The mission of the MCH Program is to prevent disease and to promote and improve the health status and integrity of families in Illinois by advocating for and assuring the availability and accessibility of comprehensive health services to those families.

The activities include:

- Statewide assessment of Maternal and Child Health needs;
- Statewide planning for Maternal and Child Health services;
- Development of standards and guidelines;
- Consultation and educational services for health professionals, health agencies, and the general public; and
- Administration of grants to local health departments, community agencies and institutions to develop, strengthen or improve Maternal and Child Health services and care.

The Division of Family Health and Divisions of Health Assessment and Screening with the Office of Community Health provide the following services:

HMHK - ***Case Management and Enhances Case Management (formerly Families with a Future and Drug-Free Families with a Future)*** provide service referral and coordination to pregnant women, infants and children statewide. They assist in outreach, assessment, family

support, provision of health services, referral and access to nutrition, family training and developmental services.

The ***Prenatal Care Program*** provides prenatal and postnatal health care with linkages for delivery, social services, health education, outreach and follow-up services.

The ***Perinatal Care Program*** coordinates regional perinatal health care systems for pregnant women and infants statewide. Services provided include neonatal follow-up which includes child find and assessment, medical diagnosis and evaluation, developmental therapy services, and referral for other early intervention services.

High Risk Infant Follow-up provides follow-up services statewide through home visits to infants identified through the **Adverse Pregnancy Outcome Reporting System (APORS).** Child find and assessment, case management, developmental services and referrals for health and medical evaluation services are provided.

The screening of newborn infants for six metabolic diseases is conducted through the ***Genetics Program.*** Treatment and follow-up is provided for all infants with abnormal results. Genetics counseling is provided to parents.

The ***Primary Pediatric Care Program*** provides primary care health services to children birth through age 19 who are at or below 185% of poverty and uninsured by Medicaid or private insurance. Nine counties have funds for these programs.

Nutritional counseling and supplemental food for eligible infants and toddlers is provided through the ***Supplemental Food Program for Women, Infants and Children (WIC).*** Children are referred to health care providers for health services, immunizations and lead screening.

The ***Vision and Hearing Program*** detects eye and ear disorders and diseases in children ages three to 18 years through a systematic screening program with specific referral and follow-up procedures. Child find and assessment, family counseling and support, referral for health and medical evaluation services are provided.

Department of Rehabilitation Services (DORS)

DORS is one of few cabinet-level state agencies devoted to serving people with disabilities and their families and may be the only agency of its type to be an official member of the state-level coordinating council on early intervention. The Department's mission is "to promote and provide equal opportunities for independence and participation in society by persons with disabilities." DORS also advocates the needs and rights of persons with disabilities at the government and community levels regardless of age and provides a number of services to

families.

In 1992 - 1993, the following services were available and are of interest to early intervention personnel and families of infants and toddlers with disabilities.

The ***Home Services Program*** offers an alternative to unnecessary institutionalization of persons with disabilities. The program can support an array of in-home care services to allow them to remain in their own homes or with their families. Of particular importance to the early intervention programs will be two specific home services: 1) the respite program that is available to families with infants and 2) a Medicaid waiver program for HIV eligible children. The Home Services program is unique in that it is the only entitlement program within DORS and is fully funded by the state. One of the most critical components of this program is personal assistant services which are funded through the Medicaid reimbursement process. This program is often the key to independence for persons with severe physical impairments.

The ***Lekotek Program*** is named for a Scandinavian word for play library. The objective of this program is to provide families with the skills, materials, and knowledge to effectively help children at home. Through the utilization of adaptive toys, parents and their children are provided skill training using toys. Lekotek offers both individual and group play therapy programs. The play groups are fully integrated. There are currently 21 Lekotek sites in the state. The priority age population served by Lekotek is birth through age 8.

Total Life Planning for Deaf/Blind Individuals is a process by which major life components such as medical, communication, socialization, vocational, school, mobility and other areas are addressed on an individual basis regardless of age. This is accomplished by utilizing specialists knowledgeable in these services throughout the state.

Infant/Toddler Family Institutes for Deaf and Blind are held annually on the campuses of the Illinois School for the Deaf and the Illinois School for the Visually Impaired, two state residential facilities operated by the Department. The Institutes, usually three to five days in length, provide a variety of evaluations and assessments to families and infants birth to five.

Disability Determination Program is federally funded and is responsible for determining the eligibility of persons for the SSI and SSDI programs which fall under the Social Security Program. The Zebley court decision has had a significant impact on the eligibility process and in particular on the birth through 2 population. The Department has provided specific information on the decision.

A continuing thrust to inform parents and providers on the importance of applying for SSI will be an ongoing goal for DORS.

In addition DORS staff can provide information on the Americans with Disabilities Act (ADA)

and other community information regarding persons with disabilities.

Illinois State Board of Education (ISBE)

ISBE serves as the lead agency for early intervention efforts funded under Part H and also provides support and leadership in other early childhood programs. Transition and integration into the community are identified as necessary components in the Early Intervention Services System Act (P.A. 87-680), which commits Illinois to a system of early intervention services for eligible infants and toddlers and their families with expansion as additional funds become available.

Prevention Initiative for Programs Offering Coordinated Services to At-Risk Infants and Toddlers and Their Families has been established to reduce school failure by coordinating and expanding services to all children under three who reside in Families With a Future (Infant Mortality High Risk) areas. Twenty-nine Families With a Future target areas have been identified by the Illinois Department of Public Health providing an array of 19 services to parents and young children including outreach and case management. The General Assembly appropriated $2,000,000 for the Prevention Initiative Program in FY 93. Fourteen Prevention Initiative projects were funded serving over 1,000 families and 1,800 children.

Prekindergarten Program for Children At Risk of Academic Failure was established in 1985 to provide grants to public school districts to conduct screening programs to identify children ages 3-5 who are at risk of academic failure and to provide appropriate educational programs for those children to increase their likelihood of school success. For FY 93, 295 proposals were funded; 258 renewal and 37 new applications. The appropriation for the Prekindergarten Program was $75,571,200 and was projected to serve 31,426 children in 531 school districts, (including 43 joint agreements) in 100 counties.

Coordinated Model Preschool Educational Program in Section 2-3.71(b) of the School Code (III. Rev. Stat. 1989, Chap. 122, Par. 2-3.71(b), as amended by P.A. 87-515, effective September 13, 1991) authorizes the Illinois State Board of Education to provide grants to school districts and public and private institutions of higher education to establish and implement coordinated model preschool programs which include both a research component in early childhood development and psychology and a personnel training component in preferred teaching methodologies in effective preschool educational programs. FY 93 was the first and only year of funding for this program. The funding level that was allocated by the State Superintendent of Education for the Coordinated Model Preschool Educational Program was $300,000. Thirteen applicants responded to the State Board's FY 93 RFP for the Coordinated Model Preschool Educational Program. Three applicants were funded.

Model Early Childhood Parental Training Program, instituted by P.A. 83-1046 effective July 13, 1988, authorized the Illinois State Board of Education to implement and administer the Model Early Childhood Parental Training Program. This program consists of grants to public school districts to conduct training programs for the parents of children in the period of life from birth to kindergarten entry. Forty-nine Model Early Childhood Parental Training projects were funded in 175 school districts with a $3,000,000 appropriation in FY 93.

Even Start Family Literacy Program described in Part B of Chapter 1 of Title 1 of the Elementary and Secondary Education Act of 1965 as amended (Federal funds) authorizes the Illinois State Board of Education to provide grants to school districts or community-based organizations to integrate early childhood education and adult education for parents into a project that builds on existing community resources. The target population served are parents and their children, ages 0 through 7, who reside in an elementary school area designated for participation in Chapter 1. In FY 93, fourteen Even Start grants were funded. The grant to the State of Illinois for FY 93 was $3.02 million.

The Regional Technical Assistance System (R*TAS), in its sixth year, provides technical assistance and in-service training to early childhood special education staff in six regions of the state. Each regional office employs a resource specialist who coordinates regional training and technical assistance. The focus of training activities through R*TAS includes: early childhood curriculum, integration, transition, family involvement, multicultural/multilingual issues and assessment. Training is open to early childhood staff in public and private school settings. Training and technical assistance were provided through conferences, topical workshops, satellite broadcasts, mini-grants, parent education packets, research papers, resource libraries, newsletters and program consultation. R*TAS statewide coordinator links training with the Illinois Technical Assistance Project (ITAP), which serves staff working with eligible infants/toddlers with delays and their families. This year regional parent resource specialists have been added to enhance the family centered services offered by R*TAS.

Child Find: Building Better Tomorrows, in its sixth year, is a child find marketing campaign developed through a grant to Gallatin-Hardin-Pope-Saline Educational Service Region. The campaign has two basic goals: 1) to help local education agencies notify large numbers of people in diverse target audiences that Child Find can assist in securing appropriate programs and services for persons with disabilities under the age of 21 years and 2) to help local education agencies inform parents of persons with disabilities of their rights to programs and services. The marketing program was designed to serve local school districts through the State Board of Education and special education cooperatives in Illinois. Program materials are made available to local school districts via their special education cooperatives, community agencies, and local interagency councils. Printed campaign materials are also available in Spanish. A toll-free number is also operated as part of the campaign.

University of Illinois at Chicago-Division of Specialized Care for Children (DSCC)

Established in 1937, the Division of Specialized Care for Children (DSCC) administers Illinois' Title V program for Children with Special Health Care Needs. Serving children and families statewide through a network of thirteen regional offices, DSCC promotes access to specialized medical diagnostic and treatment services needed by children birth to eighteen who have eligible chronic health impairments and disabilities.

Upon confirmation of state residency and medical eligibility, children and families can receive medical case management and comprehensive program coordination services from DSCC consultants. When families meet established criteria for financial need, DSCC can also assist them with the cost of the specialized medical services required to implement an approved plan of treatment recommended by a DSCC credentialled physician specialist.

Because many children with eligible medical conditions have co-existing developmental and educational needs, DSCC works cooperatively with the Illinois Early Intervention program and other related state and community-based programs to assure the availability of a seamless continuum of services, fitting DSCC covered medical services to the early intervention benefits received from other programs. Although DSCC does not directly provide or assist families with the cost of early intervention services, its program addresses the medical needs of children with chronic disabilities, improves their health and function, and allows them to benefit most effectively from the developmental interventions available through Part H.

Interagency Agreements

The Illinois State Board of Education has signed interagency agreements with the Departments of Alcoholism and Substance Abuse, Children and Family Services, Mental Health and Developmental Disabilities, Public Aid, Public Health and Rehabilitation Services. A special interagency agreement has been signed by the Illinois Planning Council on Developmental Disabilities. The Division of Specialized Care for Children and the Department of Insurance have signed a Memorandum of Understanding with the Illinois State Board of Education.

Interagency Coordination

The Individualized Family Service Plan is considered to be the contract between the service provider and the eligible family. All early intervention services are to be included in the IFSP which must be created on behalf of every eligible infant and toddler and her or his family. The service system is to support, not supplant the family. This program moves away from the emphasis that all early intervention services be provided within the framework of the educational structure by requiring interagency delivery of early intervention services. The premise of this program is that with appropriate services and resources, every family will have the opportunity to enhance the development of their infant or toddler.

IDEA, Part H, provides Illinois with an additional opportunity for the development of an array of prevention and early intervention services for infants and toddlers with developmental delays or those at risk of delays. Statewide attention has been focused on the need for a coordinated service system for these children and their families. The federal law has provided Illinois with the opportunity to make meaningful changes in how professionals, paraprofessionals, providers, and agencies deliver services including the merging of resources, the active involvement of the family, and the coordination of the delivery of services among the public and private sectors.

The greatest challenge for this program in Illinois is to provide an integrated system from the many existing public and private services and resources on behalf of infants and toddlers and their families who are in need of a continuum of prevention and early intervention services. Interagency efforts through the Illinois Interagency Council on Early Intervention have provided direction for the coordination of early intervention services. The enactment of P.A. 87-680 (see Appendix A) on September 23, 1991, was the highlight of that year. State funds were provided to the lead agency for FY 93.

Additional Early Intervention Activities

Five Year Implementation Plan

The Illinois State Board of Education submitted the Five Year Implementation Plan as required by P.A. 87-680, the Early Intervention Services System Act, to Governor Edgar. This plan identifies annual goals and objectives and outlines responsibility for activities. Governor Edgar approved the activities for Years 1 and 2.

Data Collection

As the lead agency, the Illinois State Board of Education revised the data collection forms specific to Part H in order to facilitate accurate data collection among the 56 Improvement and Expansion grantees. These revisions reduced the data burden associated with Part H by changing the quarterly report to an annual report.

Local Councils

The local interagency councils assist in developing collaborative agreements, conducting local needs assessment and planning efforts, identify/resolve local access issues, conduct child find and coordinate public awareness, assist in recruitment of specialty personnel, conflict resolution, and transition. In FFY93, 45 local interagency councils received a total budget of $1,670,200.

Technical Assistance to Local Interagency Councils

A contract was awarded to Organizational Resource Associates (ORA) of Ohio to provide technical assistance to Local Interagency Councils, the Illinois Interagency Council on Early Intervention, and the Illinois State Board of Education regarding an effective system of services to eligible infants and toddlers and their families.

Parent Mentors

The Parent Mentor Project was established this year to encourage and facilitate parent participation on the local councils as they were being developed. The concept, initiated by the Family Support Committee, grew out of a concern that parents receive some assistance in order to enhance their participation on the local councils.

Parent mentors were recruited from around the state in an effort to reflect the diversity of

Illinois citizenry. The parent mentors provide orientation training, share resources and field questions of parent members on the newly formed local councils. The mentors are compensated for their time and additional expenses through the Illinois State Board of Education.

Improvement and Expansion of Early Intervention

Approximately 64% of the 1993 Federal award was allocated for the improvement and expansion of early intervention services. $4.3 million was budgeted and 56 provider organizations submitted initial and continuation applications. It continues to be the intent of the lead agency to provide funds for programs to improve and expand their services.

Rules

The Illinois State Board of Education began the process of drafting rules for early intervention services in Illinois. The draft document continues to be developed collaboratively with parents, providers of early intervention services and state agency personnel. On March 23, 1993, the Illinois Department of Mental Health and Developmental Disabilities' Early Intervention Rules Part 121 and Part 122 were adopted.

Technical Assistance

The Technical Assistance Committee developed a draft document of the Illinois State Plan for the Development of Human and Systems Resources which was received by the Council. The plan provides the framework for the promotion of quality services by fostering the growth of persons, programs and systems involved with young children and their families.

Clearinghouse

The Illinois Early Childhood Intervention Clearinghouse is funded by the Illinois State Board of Education.

This year the Clearinghouse continued to work to establish itself as a full-service resource for the early intervention community in Illinois. Highlights of the past year included:

- handling almost 3,000 information requests;
- circulating almost 12,000 items;
- expanding its unique bibliographic database to more than 12,000 citations;
- distributing approximately $6,000 to parents and individuals with disabilities in

stipends to attend conferences and workshops;

- exhibiting or presenting at a dozen conferences and workshops throughout Illinois;
- successfully collaborating with other agencies in collection development and public awareness including Direction Service of Illinois, the Illinois Planning Council on Developmental Disabilities, the Department of Mental Health and Developmental Disabilities, the Illinois Technical Assistance Project, the Regional Technical Assistance Project, and the Illinois Fiesta Educativea; and
- continued staff involvement in statewide and local interagency council planning and public awareness efforts.

Family Conference

Working Together Today....Tomorrow was the theme of the 1993 Early Intervention Family Conference. Three hundred families from Local Interagency Councils throughout Illinois met for an informational and inspirational weekend conference in July. This conference was planned with input from families who were also presenters for many of the sessions. Sessions focused on a wide variety of topics relevant to specific family concerns as well as to building of a family centered early intervention system in Illinois. Families had the opportunity to learn, relax and support each other. The conference was hailed a success by the families who attended and requests were made to hold it annually.

Public Awareness

A grant was provided by the Illinois Planning Council on Developmental Disabilities to Landon/Gordon Public Affairs to create a public awareness project. The goal of the project was to provide information and knowledge about P.A. 87-680 to the members of the General Assembly using the existing public awareness campaign logo/theme. The activities funded by this grant included:

1. An "Open Your Heart to Early Intervention" Valentine's Day event to deliver handmade valentines to policymakers and to Governor Edgar.
2. A symposium held in Springfield that gave the early intervention community an opportunity to report to policymakers and opinion-shapers.
3. An early intervention information table in the Rotunda.
4. A coordinated drive of letters, postcards, fax or phone calls from parents, professionals and friends of early intervention to policymakers.

Achievement of Objectives

All objectives in the Fourth Year Application were met during the time frame of this report which includes October 1, 1992, through September 30, 1993.

Federal FY92 Budget/Expenditure Report

Part H Infant and Toddler Annual Report

Federal Grant Award **$9,068,264 (award includes reallottment dollars*)**

Allocated:

(A)	Administration	$830,014
(B)	Grants and Contracts	$8,238,250

Budget Breakdown

(A) Administration

	ISBE Staff & Travel	$367,700
	Interagency Council Staff Costs	$38,800
	Council Expenses	$148,634
	Office Expenses	$124,880
	Technical Assistance	$150,000
	Total Administrative Costs:	**$830,014**

(B) Grants and Contracts

Improvement and Expansion Program

Abilities Plus	$26,000
Ada S. McKinley	$28,798
Adams County Mental Health Center	$52,941
Association for Individual Development	$58,517
Blue Island	$71,684
Chicago Association for Retarded Citizens	$246,358

Children's Developmental Center	$162,746
Clinton County Rehabilitation	$95,360
Coleman Tri-County	$105,853
Coles County Association for the Retarded	$82,201
Cook County Hospital	$130,239
Delta Center	$65,436
Developmental Services Center	$170,928
DuPage Easter Seal	$76,081
Easter Seal Society	$71,894
El Valor Corporation	$68,788
Esperanza School	$24,574
FAYCO Enterprises	$90,960
Franklin-Williamson Human Services	$90,899
Fulton County Rehabilitation	$18,164
Gateway Services	$18,844
Good Shepherd Center	$28,420
Illinois Masonic Medical Center	$100,000
Jacksonville Area ARC	$57,111
Jayne Shover Easter Seal	$87,208
Jefferson County Comprehensive	$57,111
Kaskaskia Workshop, Inc.	$76,140
Kreider Services	$74,150
Little Friends, Inc.	$100,000
Macon Resources, Inc.	$100,000
Malcom Eaton Enterprises	$42,513
MARC Center	$100,000
McDonough County Rehabilitation	$37,393
Mt. Sinai Hospital Medical Center	$100,000
Opportunity Center S.E. IL	$95,210
Pathways Center for Children	$100,000
Peoria Easter Seals	$100,000
Pioneer Center (Parent Infant Center)	$72,657
Promise Center for DD, Inc.	$100,000
Proviso Association for Retarded Citizens	$42,691
Rehabilitation Institute	$106,831
Rock Island ARC	$56,864
Special Children	$83,329
Springfield ARC	$91,512
UCP of Land of Lincoln	$89,345
Warren Achievement Center	$43,749
Wm. M. BeDell ARC	$100,000
Woodlawn Early Intervention Center	$100,000

48 Private Agency Grants Total	**Subtotal:**	**$3,899,499**
Chicago School District #299		$96,145
DeKalb County Special Education		$100,000
Hamilton County CUSD #10		$93,161
Lake McHenry Regional Program		$77,685
Northwest Suburban Special Education		$100,000
South Metropolitan Association.		$288,470
Southwest Cook county Cooperative		$94,254
Wabash & Ohio Valley Special Education District		$167,826
8 Public School Grants Total	**Subtotal:**	**$1,017,541**
	Total Improvement and Expansion Grants:	**$4,917,040**

Other Projects

Central Directory		$80,000
Sites for EI System Implementation		$1,649,507
	Total Other Projects:	**$1,729,507**
	Total Grant and Contract Costs:	**$6,646,547**
	Carryover	**$ 149,519**
	Total Federal Grant Award	**$9,068,264**

*Reallotment dollars provides budget support for ongoing SFY93 and SFY94 activities.

1/REPORT3/1293

WORLD-CLASS EDUCATION FOR THE 21ST CENTURY: THE CHALLENGE AND THE VISION

VISION STATEMENT

As we approach the 21st century, there is broad-based agreement that the education we provide for our children will determine America's future role in the community of nations, the character of our society, and the quality of our individual lives. Thus, education has become the most important responsibility of our nation and our state, with an imperative for bold new directions and renewed commitments.

To meet the global challenges this responsibility presents, the State of Illinois will provide the leadership necessary to guarantee access to a system of high-quality public education. This system will develop in all students the knowledge, understanding, skills and attitudes that will enable all residents to lead productive and fulfilling lives in a complex and changing society. All students will be provided appropriate and adequate opportunities to learn to:

- communicate with words, numbers, visual images, symbols and sounds;
- think analytically and creatively, and be able to solve problems to meet personal, social and academic needs;
- develop physical and emotional well-being;
- contribute as citizens in local, state, national and global communities;
- work independently and cooperatively in groups;
- understand and appreciate the diversity of our world and the interdependence of its peoples;
- contribute to the economic well-being of society; and
- continue to learn throughout their lives.

MISSION STATEMENT

The State Board of Education believes that the current educational system is not meeting the needs of the people of Illinois. Substantial change is needed to fulfill this responsibility. The State Board of Education will provide the leadership necessary to begin this process of change by committing to the following goals.

ILLINOIS GOALS

1. Each Illinois public school student will exhibit mastery of the learner outcomes defined in the State Goals for Learning, demonstrate the ability to solve problems and perform tasks requiring higher-order thinking skills, and be prepared to succeed in our diverse society and the global work force.

2. All people of Illinois will be literate, lifelong learners who are knowledgeable about the rights and responsibilities of citizenship and able to contribute to the social and economic well-being of our diverse, global society.

3. All Illinois public school students will be served by an education delivery system which focuses on student outcomes; promotes maximum flexibility for shared decision making at the local level; and has an accountability process which includes rewards, interventions and assistance for schools.

4. All Illinois public school students will have access to schools and classrooms with highly qualified and effective professionals who ensure that students achieve high levels of learning.

5. All Illinois public school students will attend schools which effectively use technology as a resource to support student learning and improve operational efficiency.

6. All Illinois public school students will attend schools which actively develop the support, involvement and commitment of their community by the establishment of partnerships and/or linkages to ensure the success of all students.

7. Every Illinois public school student will attend a school that is supported by an adequate, equitable, stable and predictable system of finance.

8. Each child in Illinois will receive the support services necessary to enter the public school system ready to learn and progress successfully through school. The public school system will serve as a leader in collaborative efforts among private and public agencies so that comprehensive and coordinated health, human and social services reach children and their families.

Developed by citizens of Illinois through a process supported by the Governor, the Illinois State Board of Education and the Illinois Business Roundtable.
Adopted as a centerpiece for school improvement efforts.

Printed by the authority of the State of Illinois.

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ILLINOIS STATE BOARD OF EDUCATION
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Mary Jayne Broncato, *Interim State Superintendent*

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